

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION FOR DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Johnston, Hinesley, Flowers, P.C.  
P.O. Box 2246  
Dothan, AL 36302

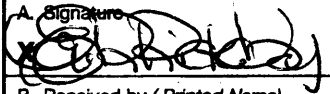
2. Article Number  
(Transfer from service label)

7006 2760 0002 4407 3732

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

A. Signature 		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) Erin R. Rickaby		C. Date of Delivery 9-14-07
D. Is delivery address different from item 1? If YES, enter delivery address below 076798		<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input checked="" type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee)		<input type="checkbox"/> Yes